

Utah State Office of Education
Educator Quality and Licensing Application
to Teach: *Athletic Skills Development (elective credit only)*

School:	District:
Principal:	Telephone Number:
Email Address:	

Please Complete in Full
For teachers not endorsed in physical education

Teacher Name	Cactus #	Endorsement Area	Coaching Endorsed (UHSAA) YES or NO

Principal's Signature	Date
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Attach a Check for \$35.00 per Teacher on list and mail to:

Educator Quality and Licensing
Utah State Office of Education
Box 144200
250 East 500 South
Salt Lake City, Utah 84114-4200

<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">For USOE Use Only</div> <div> Teachers Approved: _____ _____ _____ </div> <div> Teachers Denied: _____ _____ _____ _____ </div>	
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